NOTIFICATION OF MULTICANDIDATE STATUS

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(See reverse side for instructions)

	This	form	should	be	filed	after	the	Committee	aualifies	as a	multicandidate	committee.
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		OMMITTEE IN FULL AMENTO VALLEY LINCO	LN CLUB FEI	DERAL			
(-)		Street Address ER PLAZA DR. #150			2. FEC IDENT C003770		NUMBER
	State ar	nd ZIP Code	CA	95833	3. TYPE OF C STATE OTHER	PARTY	(check one)
. ST	ATU:	one of the following situation S BY AFFILIATION: The co and simu n with:	mmittee submit	ted its Statement of			
		tee Name:					
. ST (a)	Ca	S BY QUALIFICATION: ndidates: The committee how (ONLY State party committee)		ve this blank.):	·		
	(!)	Name		Office Sought	State/Di	strict	Date
	(i) (ii)	DANIEL LUNGREN CARLY FIORINA		House	CA CA	03	10/19/2008
	(iii)	KIM VANN		Senate House	CA	03	09/27/2010
	(iv)	RICKY GILL		House	CA	09	11/02/2012
	(v)	SCOTT JONES		House	CA	07	03/16/2016
	on: Result Sub Qu at I have	ntributors: The committee 11/18/2010 gistration: The committee I omitted on: 03/28/2008 alification: The committee we examined this Statement and to the TNAME OF TREASURER	has been registo	ered for at least 6 m requirements on:	onths. FEC 03/16/2016	FORM	1 was ·
avid Bau		on of false, erroneous, or incomplete in		t the person signing this Sta D BE REPORTED WITHIN			2/2016 2 U.S.C. §437

For further information contact:
Federal Election Commission, Washington, DC 20463
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1M